Claim # 318

Application	or	Docket	Number
	Oi	DOCKEL	Mailing

PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003												
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALI TYPE	SMALL ENTITY TYPE		OR	OTHER SMALL	1		
TOTAL CLAIMS		20				RAT	Ε	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS		() minus 20=		* 0		X\$ 9	=		OR	X\$18=		
INDEPENDENT CLAIMS		minus 3 =		* Ф		X42	=	· · · · · · · · · · · · · · · · · · ·	OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT							+140	=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2					TOTA	\L	225	OR	TOTAL			
CLAIMS AS AMENDED - PART II OTHER THAN												
		(Column 1) CLAIMS		(Colur		(Column 3)	SMA	LL E	ENTITY	OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA	RAT	Ē	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	**		=	X\$ 9	=_		OR	X\$18=	
AME	Independent	* NTATION OF MI	Minus	***	CLAIM	=	X42	- -		OR	X84=	
	I INOT PHESE	NIATION OF W	JUITLE DEF	ENDENT	CLAIN		+140	=	ŧ	OR	+280=	
, v .:			,				TO ADDIT, F			OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colur		(Column 3)	<u>.</u>					
MENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	*	Minus	***	· CLAIM	=	X42	=]		OR	X84=	•
L	FINOI PRESE	NTATION OF MI	JUITLE DEF	ENDENT	CLAIM		+140	_		OR	+280=	
	. 1					. :	TO	ΓAL			TOTAL	·
		(Column 1)		(Cal	O\	(Caluma 0)	ADDIT. F	EE	<u> </u>	JOH	ADDIT. FEE	
		(Column 1) CLAIMS		(Colur	EST	(Column 3)	i ——	_	ADDI			ADDI
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DÚSLY	PRESENT EXTRA	RAT	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= ,	X\$ 9	-		OR	X\$18=	
AME	Independent	*	Minus	***		=	X42:	=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULHPLE DEF	'ENDEN]	CLAIM		+140	= "		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												